COMBINED OATH, DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe that I am an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:				S	
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I hereby state that I have respecification, including the					
I acknowledge the duty to chis application in accordan			-		
I hereby claim foreign priority benefits under title 35, U.S.C. §119 of any foreign application(s) for patent or inventor certificates listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:					
Prior Foreign Application				Priority	Claimed
0403537.4	Great Britain	18 Febru	arv 2004	[X]Yes	[]No
(Number)	(Country)		onth/Year Filed)		
				[]Yes	[] No
(Number)	(Country)	(Day/Mo	onth/Year Filed)		ļb
I hereby claim to benefit under 35 U.S.C. §119 (e) of any United States Provisional application(s) listed below: US Provisional Application Serial No.: Filing Date:			al		
		**************************************	**************************************		
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I hereby claim the benefit under Title 35, U.S.C. §120 of any United States application(s) listed below, and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, U.S.C. §112, I acknowledge the duty to disclose maternal information is defined in Title 37, Code of Federal Regulations §1.56(a) which occurred

between the filing date of the prior application and the national or PCT international filing date of this application:

US Patent Application:	Filing Date:	Status:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Power of Attorney: As a named inventor, I hereby appoint

X	Practitioners Associated with the Customer Number:	27389
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as my/our attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from the Assignee of this application as to any action to be taken in the United States Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned.

SEND ALL CORRESPONDENCE TO:	DIRECT TELEPHONE CALLS TO:
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Inventor's Signature	LR-MI
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Inventor's Signature	
Date of Signature:	
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	UNITED STATES OF AMERICA
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US Patent Application:	Filing Date:	Status:
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Power of Attorney: As a named inventor, I hereby appoint

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as my/our attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

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New York, NY 10022	

Full Name of First Inventor:	Geoffrey Robert HAMMOND
Inventor's Signature	
Date of Signature:	
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Lawrence T. LEVINE Inventor's Signature Date of Signature: Inventor's Citizenship: Residence Address: C/o Creative Services 255 Woodside Circle Fairfield, Connecticut 06825 UNITED STATES OF AMERICA Post Office Address: Full Name of Third Inventor: Inventor's Signature Date of Signature: Inventor's Citizenship: Residence Address: United States of America 278 Maple Avenue Somerset New Jersey 08873 UNITED STATES OF AMERICA Post Office Address: -same as residence address-	Full Name of Second Inventor:	
Date of Signature: Inventor's Citizenship: Residence Address: C/o Creative Services 255 Woodside Circle Fairfield, Connecticut 06825 UNITED STATES OF AMERICA Post Office Address: Full Name of Third Inventor: Inventor's Signature Date of Signature: Inventor's Citizenship: Residence Address: United States of America 278 Maple Avenue Somerset New Jersey 08873 UNITED STATES OF AMERICA	Tail Taille of Social Art Silver	Lawrence T. LEVINE
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Date of Signature: Inventor's Citizenship: Residence Address: 278 Maple Avenue Somerset New Jersey 08873 UNITED STATES OF AMERICA	Full Name of Third Inventor:	Lamson NGUYEN
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